

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 09/658742 Examiner : Stork GAU : 2178

From : PAP Location : (IDC) FMF FDC Date : 11/14/05

Tracking #: EPM09/658742 Week Date: 8/1/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> HFW	<u>11/7/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other NOA
<input type="checkbox"/> DRW	_____	<u>7/25/05</u>
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Renumbered claim 3 (original claim 5)  
depends on cancelled original claim 4. Please  
advise.

Thank you

[XRUSH] RESPONSE: \_\_\_\_\_

**INITIALS:**

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04